Eye care professional portal

Getting Started Guide



Your new Eye Care Professional Portal streamlines your ability to provide high quality frames and lenses to your patients who are Versant Health members! Review these instructions to get started using this exciting new program!



Key features

Using this portal, you can:

- Verify member eligibility and benefits, and submit service claims
- Submit orders for frames, lenses, lens options, and contact lenses
- Review member, order and claim history
- Get training, announcements, benefit alerts, and Versant Health forms
- Create your own profile and set up your preferred lab registration accounts

Logging in

- 1. Click the <u>Eye Care Professional Portal</u> link and create a new account. See the Pre-registration video or the <u>Comprehensive Portal Guide</u> for instructions.
- 2. Log in using your new credentials, choose your default location, and add your new lab registrations. Then, you can access the Portal Dashboard.



Look up eligibility and benefit information

Search By	Iember Order/Claim Service Date* 03/31/2020	Date of Birth* 05/26/1997	ID* Member ID -OR-	Last Name* McMullin	* Indicates Required Search
Complete	the Member Search	n Fields			
(De els					
← Back	Location* 5 Railroad Ave, PA, 15006	(DV33111,SV2222) Make this my	default location Practitioner Annie Hao	•	
Q Search By	Displaying Search Results	for: Service Date: 1/17/2019, DOB: 09/02/196	4, Member ID: 22222222		
Select	Member Information	Relationship	Group	Plan Name	-
0	Jerry Johnson 09/02/1964 222222222	Self	HealthFirst Newyork 123456678	XYZ Vision Plan	1
	View Detailed Benefit Se	ervice Record Form			

Be sure the practitioner accepts the member's benefits

Select Services Below											
Exam Frames Contact Lens Spectacle Lens Contact Lens Fit & F/U View/Void Authorizations Cancel											
Benefit Details Service Date: 03/31/2020 Print Benefit Details 👼											
BENEFIT MESSAGES											
Plan Covered Benefits											
Category	Description	Frequency	Copay Amount	Allowed Per Period	Available	Next Available Date	Allowance Remaining				
Exam	RoutineExam	Every 12 Months from service date	\$10		Yes		-				
Exam	ContactLensEvalFitting	Every 12 Months from service date	\$20		Yes						
Exam	ContactLensEvalFittingSpecialty	Every 12 Months from service date	\$20	-	Yes						
Exam	ContactLensEvalFittingDailyWear	Every 12 Months from service date	\$20		Yes	-					
Exam	ContactLensEvalFittingEstablishedPatient	Every 12 Months from service date	\$20	-	Yes						
Exam	ContactLensEvalFittingExtendedWear	Every 12 Months from service date	\$20		Yes						
Exam	ContactLensEvalFittingNewWear	Every 12 Months from service date	\$20		Yes						
Frame	PremierFrame	Every 12 Months from service date	\$25		Yes						

From the Dashboard, choose the date and Member information in the fields provided. Click **Search**.

If the member you searched for does not participate in your particular network, you will be required to choose a different **practitioner** who accepts that member's benefits. Then click the button to select the member.

3.

2.

 ${\sf Click}\,{\sf the}\,{\sf View}\,{\sf Detailed}\,{\sf Benefits}$

button beside the Member's name in the results list. The Member Eligibility information displays.

Review the Member Benefits Messages

Submitting a claim

Submit a claim to get paid for services (exams, contact lens fitting and follow ups, or medical optometry/medical surgical).

Select Services Below			
Z Exam 🔲 Frames 📄 Contact Lens 📄 Spectacle Lens 📄 Contact Le	ens Fit & F/U View/Void Authorizations Cancel Claim	1.	From the Member Eligibility Information page, click the
Select the Services (Exam Only)			services you are performing and click Claim . The Exam or Services tab displays.
1 2 Exam Claims Service Categories Dilated Eye Exam (OR) Fundus Photography performed Is a member Diabetic (1)	3 Review & Submit		
Yes No Yes O No			In the Exam tab, enter the
Disease Reporting Diagnosis (Check all known conditions for this patient.) TYPE 2 ×		2.	Exam details for the visit and click Next . The Claims tab
Please Enter Diagnosis Codes *	Please Enter Procedure Codes • × •		aispiays.
Z01.01 ×	92014 ×		
	* Indicates Required Cancel Next		

Be sure the practitioner accepts the member's benefits

	Exam	Claim	15	3 Review & Subm	nit				
Referring Practitio	ner Information		Serv	ice Date:	Place of Service *				
Z Referring Prov	vider same as Rendering Provider		03/3	31/2020	11. Office	*			
NPI									
1104939651	Middle Name		Please E	nter Diagnosis Codes *					
TIMOTHY	Phone None					*			
Last Name			Z01.01	- E					
BRAIM							3	II II	i the Claims tab, enter the
Examination ()Please select th *Note: When applic	e HCPCS Code based on the Prescription range. cable, enter the total U&C charge for the line. Do not multiply with Da	iys or Units.				~		c c S	laim details for the visit and lick Next . The Review & ubmit tab displays
HCPCS Codes	Description	Modifier	U&C charges*	Days or Units(s)	Diagnosis Codes			0	
92014	OPHTH MEDICAL XM&EVAL COMPRHNSV ESTAB PT 1/>		\$ 50.00	1	Z01.01 - ENC EXAM EYE	SVISION W/ABNORM FIND Primary			
Enter the (Claims Details	<u> </u>		3	Back	Cancel Next]		
		Claim	ns	Review & Subn	nit				
*To calculate Mer Summary	mber Out of Pocket, please refer to Service Record Form.	Claim	15	Review & Subn	nit				
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Submitting an order



Select the Service and Materials (Exam and Materials) Types

ame Source *	SKU Number *		Collection - tag/tie	r *		
Lab Supplied	1150480	==OR ==	Premier		× •	
			Note: If you don't f	ind the frame filtering by tags, searc	h by SKU number	
anufacturer *	Brand *	Model •		Color •		
COLLECTION FRAMES × -	COLLECTION FRAMES X *	G PEARL	х 💌	SATIN BLACK	× *	
e Size *	Temple Length *	Frame Type *				
53 × *	140 x 🕶	Zyl Edge	*			
53 mm 31 mm	19 mm 55 mm		00			

Select the Eyewear Details

From the Member Eligibility Information page, click the exam and/or materials and click **Orders/Claims.** The Exam tab displays.

In the **Exam** tab, enter the exam details for the visit and click **Next**. The Eyewear tab displays.

3. In the **Eyewear** tab, enter the prescription, frame, lens, and option details for the order. Then click **Next**.

2.

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In the **Claims** tab, enter the services information associated with the order. Then click **Next**.

Your Order Has Been Successfully Received By The Lab.									
*To calculate Member Out of P	ocket, please refer to <u>Ser</u>	vice Record Form,			Print				
PO #: BAA5978583D4424 Lab Reference #: SP10S3MO Submitted On: 04/01/2020 Place of Service: 11 Service Date: 03/31/2020	Member Details ROSNER, ORBISON DOB: 12/16/1969 206695184851 Global Benefit	Practitioner Details NPI: 1104939651 Name: TIMOTHY BRAIM TAXID: 130443867	Referring Practitioner Details NPI: 1104939651 Name: TIMOTHY BRAIM Medicaid ID:	Shipping Info Acct#: 045352 Address: 2 HIGHVIEW WAY, MECHANICVILLE, NY, 12118	Lab VERSANT Meridian Phoenix - Phoenix 3711 East Atlanta Avenue . AZ, 85040, (800) 352-5465,				

In the **Review & Submit** tab, review the order details and click **Submit Order**. The Order Summary page displays with the **Lab Reference Number**.

5.

1.

Order Received by the Labs

Viewing office order and claim history

Filter	Locking for alignment? If your order has been in "Shipped" status for more than 5 business days and you have not yet received it, a tracking number can be obtained by contacting the lab in which the order was placed. Click have for contact information. Orders/Claims history (Claims - Last 4 yeers of history Orders - from 12/08/2019) Remake indicators: Repair/Replace @ Warranty @ Redo									
ate Range ast 90 Days 🗸										
rder Status								Search	٩	
All(151)	Member Informatio	on	Claims Summ	ary	Orders Summary					
Waiting for Information from Provider (0)	Member Info 🌲	Provider Details 🌲	Claim Number 🌲	Claim Status 🌩	PO/Order Number 🌲	Submitted On 🌲	Lab ≑	Order Status 🌲	Action 🖨	
Waiting for Frame (Print Packing Slip) (0) Under Review (18)	ROSNER, ORBISON 12/16/1969 206695184851	BRAIM, TIMOTHY 1104939651 DAVIS VISION	<u>6601832</u> 03/31/2020	PENDING 03/31/2020	BAA5978583D4424	04/01/2020	VERSANT Meridian Phoenix - Phoenix	Order Received 04/08/2020	8	
Successfully processed (0) Shipped (0)	ROSNER, ORBISON 12/16/1969 206695184851	BRAIM, TIMOTHY 1104939651 DAVIS VISION		Draft Action Required					0 8	
Ready to Ship (0) Preparing Your Order (0) Order Received (107)	DEMOSS_EWING 01/21/1995 206688319271	BRAIM, TIMOTHY 1104939651 DAVIS VISION	<u>6601828</u> 03/31/2020	PENDING 03/31/2020	<u>182610E5293441C</u>	03/31/2020	VERSANT Meridian Phoenix - Phoenix	Order Received 04/07/2020	8	
In Process – Frame Received (0) In Process (0)	HAPPEL, CHARLES 10/16/1983 2069113741	BRAIM, TIMOTHY 1104939651 DAVIS VISION	<u>6601827</u> 03/31/2020	PENDING 03/31/2020	7AE02BCA26084AB	03/31/2020	VERSANT Duffens Optical - Denver	Order Received 04/07/2020	8	
Draft Action Required (26) Cancelled (0)	WORTHINGTON CALEB 02/18/1991	BRAIM, TIMOTHY 1104939651	6601826 03/31/2020	PENDING 03/31/2020	21C07139A2A949A	03/31/2020	VERSANT Duffens Optical - Denver	Order Received	×	

From the Dashboard, click **View Orders / Claims**.

Review the Office Orders History

	Orders/Claim	s History (i) Orde	rs prior to 12/08/2019 - Davis	Members only Claims prior	to 12/08/2019 Ref	resh					Vi	ewing member
Filter		Looking for shipment? If y Click here for contact info	our order has been in "Shipped" stat mation.	tus for more than 5 business days and	you have not yet received it, a	a tracking number can be	e obtained by contacting the lab in wh	ich the order was placed.		×	•	
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								Search		٩		the Order History icon 🔼
mber Informat	tion	Claims Sum	mary	Orders Summa	ry							•9
er Info 🌲	Provider Details 🌲	Claim Number 🖨	Claim Status 🌲	PO/Order Number 🌲	Submitted On 🌲	Lab ≑	On	der Status 🌲	Action ≑			
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Member Orders and Claims History

Getting additional program resources

The Eye Care Professionals Portal has a wide range of resources to support you in your business, including in using the portal, (training videos, FAQs, and benefit alert changes), frequently used forms, medical management policy information, plus system and organization announcements! See the Versant Health Training Hub for more information at versanthealth.com/training.



Need more help?

For help with the Eye Care Professionals Portal call: **1-877-235-5316** (Davis Vision) **1-877-235-5317** (Superior Vision)